PTO/SB/06 (08-03)

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<u> </u>	PATENT APPLICATION FEE DETERMINATION RECORD Substitute for Form PTO-875								Application or Docket Number		
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CLAIMS AS FILED - PART I (Column 1)											
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If the entry in column 1 is less than the entry in column 2: write "0" in column 3. If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20". The "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20".											
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ADDRESS. SEND TO: Con	Department of (Imissioner for	Patents P.O.	D. Box 1450	. Alexandria, VA 22	his burden, s 1313-1450 in	hould be sent to	the Chief Info	ridual case	Any comme	nts	
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